

**United States Bankruptcy Court
Southern District of Ohio**

IN RE:

Case No. _____

HARRIS, Frederick & HARRIS, Mary L.Chapter 7

Debtor(s)

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	81,000.00		
B - Personal Property	Yes	2	9,835.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		85,958.00	
E - Creditors Holding Unsecured Priority Claims	Yes	2		4,500.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	14		30,893.76	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			1,903.21
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,156.33
Total Number of Sheets in Schedules		25			
Total Assets			90,835.00		
Total Liabilities				121,351.76	

EXHIBIT

9 HARRIS
6-5-07
AMB

EXHIBIT7

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor holds no interest in real property, write "None" under "Description and Location of Property".

Do not include interests in executory contracts and unexpired leases on the schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a security interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim".

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HWJC	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
11716 Elkwood Drive Cincinnati, Ohio 45240	JTWROS	J	81,000.00	73,000.00
TOTAL			81,000.00	

(Report also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L

Debtor(s)

Case No.

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attached a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions only in Schedule C - Property Claimed as Exempt.

Do not include interests in executory contracts and unexpired leases on the schedule. List them in Schedule G - Executory Contracts and Unexpired Leased. If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property".

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HWJC	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash on Hand		
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Emery Credit Union, Christmas Club, Savings Account	W	100.00
		Fifth Third Bank, checking account	W	90.00
			J	20.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		Misc. household goods and furnishings	J	1,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel		Wearing Apparel	H	200.00
		Wearing Apparel	W	200.00
7. Furs and jewelry.		Wedding Band	H	100.00
		Wedding Rings	W	125.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
13. Interests in partnerships or joint ventures. Itemize.	X			
14. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
15. Accounts receivable.	X			
16. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			

SCHEDULE B - PERSONAL PROPERTY

IN RE HARRIS, Frederick & HARRIS, Mary L.

Debtor(s)

Case No.

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W I C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
18. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
19. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
21. Patents, copyrights, and other intellectual property. Give particulars.	X			
22. Licenses, franchises, and other general intangibles. Give particulars.	X			
23. Automobiles, trucks, trailers, and other vehicles and accessories.		1998 Ford Windstar Van	W	8,000.00
24. Boats, motors, and accessories.	X			
25. Aircraft and accessories.	X			
26. Office equipment, furnishings, and supplies.	X			
27. Machinery, fixtures, equipment, and supplies used in business.	X			
28. Inventory.	X			
29. Animals.	X			
30. Crops - growing or harvested. Give particulars.	X			
31. Farming equipment and implements.	X			
32. Farm supplies, chemicals, and feed.	X			
33. Other personal property of any kind not already listed. Itemize.	X			
TOTAL				9,835.00

0 continuation sheets attached

SCHEDULE B - PERSONAL PROPERTY

(Include amounts from any continuation sheets attached.
Report total also on Summary of Schedules.)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C", respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED NATURE OF LIEN AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL UNSECURED PORTION, IF ANY
Account No. _____ Ocwen Federal Bank 1675 Palm Beach Lakes Blvd Palm Beach, FL 33401-2122		J	11716 Elkwood Drive Cincinnati, Ohio 45240 location of real estate Value \$ 81,000.00		X		73,000.00
Account No. _____ The Huntington P.O. Box 2059 Columbus, OH 43216		J	1998 Ford Windstar Van Value \$ 8,000.00		X		12,958.00 4,958.00
Account No. _____			 Value \$				
Account No. _____			 Value \$				
Account No. _____			 Value \$				
Account No. _____			 Value \$				
Subtotal (Total of this page)							85,958.00
(Complete only on last sheet of Schedule D) TOTAL							85,958.00
(Report total also on Summary of Schedules)							

0 Continuation Sheets attached

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and account number if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of this petition.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C", respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the Total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS

(Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2)

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,650* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to a maximum of \$4,650* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to a maximum of \$2,100* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6)

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☒ **Taxes and Other Certain Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

* Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 Continuation Sheets attached

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IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	H W I C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	TOTAL AMOUNT OF CLAIM
							AMOUNT ENTITLED TO PRIORITY
Account No. City Of Forest Park Income Tax 1201 W. Kemper Road Cincinnati, OH 45240		J	Local Income Tax 1997-98-99-00-01		X		1,900.00
							1,900.00
Account No. Internal Revenue Service Cincinnati, OH 45999		J	Federal Income Tax 1999-00-01		X		2,200.00
							2,200.00
Account No. Ohio Dept. Of Taxation P.O. Box 182402 Columbus, OH 43218-2402		J	1999 State Income Tax		X		400.00
							400.00
Account No.							
Account No.							
Account No.							
Account No.							

Sheet 1 of 1 Continuation Sheets attached to Schedule E

Subtotal
(Total of this page) **4,500.00**

(Complete only on last sheet of Schedule E) **TOTAL 4,500.00**
(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C", respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Ace Check Cash 342 Northland Blvd Cincinnati, OH 45240		H	checking cashing		X		450.00
Account No. Ace Check Cash 342 Northland Blvd Cincinnati, OH 45240		W	Check Cashing		X		775.00
Account No. Ace Check Cash 7331 Montgomery Road Silverton, OH 45240			Assignee or other notification for: Ace Check Cash				
Account No. Alliance Lab Services P.O. Box 695007 Cincinnati, OH 45269-5007		H	Medical Bills		X		171.45
Account No. American Recovery Systems, Inc. 1699 Wall Street, Suite 300 Mt. Prospect, IL 60056-5788		H	Collection		X		578.18
Subtotal (Total of this page)							1,974.63
(Complete only on last sheet of Schedule F) TOTAL							
(Report total also on Summary of Schedules)							

13 Continuation Sheets attached

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W / C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Anesthesia Group Practice Inc. P.O. Box 691429 Cincinnati, OH 45269-1429		H	Medical Bills		X		206.25
Account No. AT&T Consumer Lease Services P.O. Box 2130 Bedford Park, IL 60499-2130		H	Utility Bill		X		60.00
Account No. Beacon Orthopedic Physicians P.O. Box 641196 Cincinnati, OH 45264		H	Medical Bill		X		30.00
Account No. Bhupendra Mahida MD Location 0871 Cincinnati, OH 45264		H	Medical Bill		X		215.00
Account No. Capital One P.O. Box 85147 Richmond, VA 23285		W	Credit Card		X		2,511.00
Account No. Capital One P.O. Box 85147 Richmond, VA 23285		H	Credit Card		X		900.00
Account No. Cardiology Assoc. Of Cincinnati 1418 Solutions Center Chicago, IL		H	Medical Bill		X		12.80

Sheet 1 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page)

3,935.05

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Check'N Go Of Ohio Inc. 1184 W. Kemper Rd Cincinnati, OH 45240		W	Check Cashing		X		287.50
Account No. Check'N Go Of Ohio Inc. 1184 W. Kemper Rd Cincinnati, OH 45240		W	Check cashing		X		402.50
Account No. Check'N Go Of Ohio Inc. 1184 W. Kemper Rd Cincinnati, OH 45240		W	Check Cashing		X		230.00
Account No. Cincinnati Bell Department 1811 Cincinnati, OH 45274-1811		H	Utility Bill		X		185.00
Account No. Cincinnati Bell Wireless P.O. Box 741832 Cincinnati, OH 45274-1832		W	Utility Bill		X		377.80
Account No. Diversified Adjustment Service Inc. P.O. Box 32145 Fridley, MN 55432-0145			Assignee or other notification for: Cincinnati Bell Wireless				
Account No. Cinergy Corp P.O. Box 740124 Cincinnati, OH 45274		H	Utility Bill		X		1,134.41
Subtotal (Total of this page)							2,617.21
(Complete only on last sheet of Schedule F) TOTAL							
(Report total also on Summary of Schedules)							

Sheet 2 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page)

2,617.21

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Hamilton Municipal Court Small Claims Complaint 100 Main Street Cincinnati, OH 45202			Assignee or other notification for: Cinergy Corp				
Account No. Cinergy Corp P.O. Box 740124 Cincinnati, OH 45274		W	Utility Bill		X		381.36
Account No. City Of Forest Park Utility Stormwater Managment 1201 W. Kemper Road Forest Park, OH 45240-1697		J	Utility Bill		X		40.00
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154		H	Collection Accounts		X		1,312.49
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154		W	Collection Accounts				215.29
Account No. Crescent Womens Medical Group P.O. Box 710820 Cincinnati, OH 45271		W	Medical Bill		X		160.00
Account No. Deaconess Hospital 311 Straight Street Cincinnati, OH 45219		H	Medical Bill		X		164.55

Sheet 3 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page)

2,273.69

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Medical Recovery Systems P.O. Box 20010 Cincinnati, OH 45220-0010			Assignee or other notification for: Deaconess Hospital				
Account No. Deborah A. Fritz MD 10550 Montgomery Rd. #23 Cincinnati, OH 45242		H	Medical Bill		X		10.00
Account No. Faculty Plan Of Good Samaritan P.O. Box 631395 Cincinnati, OH 45263		W	Medical Bill		X		712.50
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154			Assignee or other notification for: Faculty Plan Of Good Samaritan				
Account No. FAL Riverside Medical Fairfield 200 Fairfield Ave Bellevue, KY 41073		H	Medical Bill		X		121.00
Account No. FAL Riverside Medical Fairfield 200 Fairfield Ave Bellevue, KY 41073		W	Medical Bill		X		185.00
Account No. Fifth Third Bank Card Center P.O. Box 740789 Cincinnati, OH 45274-0789		H	Credit Card		X		800.00
<div> <div>Sheet 4 of 13 Continuation Sheets attached to Schedule F</div> <div>Subtotal (Total of this page)</div> </div>							1,828.50
<div> <div>(Complete only on last sheet of Schedule F) TOTAL</div> <div>(Report total also on Summary of Schedules)</div> </div>							

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IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. First Consumers National Bank P.O. Box 3567 Portland, OR 97208-3567		W	Credit Card		X		2,200.00
Account No. First Credit International Corp P.O. Box 13283 Akron, OH 44334-8683		W	Collection Account		X		190.43
Account No. G C Services Collection Agency Division P.O. Box 2774 Houston, TX 77252		H	Collection Account		X		54.22
Account No. Good Samaritan Hospital P.O. Box 20010 Cincinnati, OH 45220-0010		W	Medical Bill		X		1,930.73
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154			Assignee or other notification for: Good Samaritan Hospital				
Account No. Good Samaritan Hospital P.O. Box 20010 Cincinnati, OH 45220-0010		H	Medical Bill		X		116.49
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154			Assignee or other notification for: Good Samaritan Hospital				
Subtotal (Total of this page)							4,491.87
(Complete only on last sheet of Schedule F) TOTAL							
(Report total also on Summary of Schedules)							

Sheet 5 of 13 Continuation Sheets attached to Schedule F

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Good Samaritan Hospital P.O. Box 69098 Cincinnati, OH 45269-0998		H	Medical Bill		X		419.69
Account No. Greater Cincinnati Cardiovascular Dept. 1462 Cincinnati, OH 45263-1462		W	Medical Bill		X		8.00
Account No. Greater Cincinnati Waterworks Dept. 1845 Cincinnati, OH 45274-1845		H	Utility Bill		X		98.00
Account No. Hauw T. Han, MD 7593 Tylers Place Blvd.#104 West Chester, OH 45069-0000		H	Medical Bill		X		198.45
Account No. Heartland Home Health Care & Hospice Dept. L-1801 Columbus, OH 43260		H	Medical Bill		X		195.00
Account No. Hehman & Bramlage, Md's Inc. 2943 Eastern Avenue Cincinnati, OH 45226-1066		H	Medical Bill		X		1.76
Account No. Household Finance Corp 1091 Smiley Avenue Cincinnati, OH 45240		H	Signature Loan		X		252.98

Sheet 6 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page) 1,173.88

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W I C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I T A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Surpas Resource Corp Suite 150 10,000 Richmond Houston, TX 77042-4200			Assignee or other notification for: Household Finance Corp				
Account No. I.D.CC 872 Ohio Pike Cincinnati, OH 45245		H	Medical Bill		X		104.90
Account No. J.C. Pennys P.O. Box 530945 Atlanta, GA 30353-0945		W	Credit Card		X		300.00
Account No. Lab Corp. Of America P.O. Box 2240 Burlington, NC 27216-2240		W	Medical Bill		X		24.00
Account No. Medical X-Ray Inc. P.O. Box 42456 Cincinnati, OH 45242		W	Medical Bill		X		3.00
Account No. Medical X-Ray Inc. P.O. Box 960483 Cincinnati, OH 45296-0483		W	Medical Bill		X		99.00
Account No. Medical X-Ray Inc. P.O. Box 42456 Cincinnati, OH 45242		W	Medical Bill		X		57.50

Sheet 7 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page)

588.40

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Mega City Collection Midcity Station P.O. Box 308 Dayton, OH 45402		W	Collection Account		X		55.80
Account No. Mercy Hospital Hamilton/Fairfield P.O. Box 640855 Cincinnati, OH 45264-0855		W	Medical Bill		X		310.64
Account No. CBT Receivables Management P.O. Box 1508 Toledo, OH 43603			Assignee or other notification for: Mercy Hospital Hamilton/Fairfield				
Account No. Mercy Hospital Hamilton/Fairfield P.O. Box 640855 Cincinnati, OH 45264-0855		H	Medical Bill		X		2,576.46
Account No. CBT Receivables Management P.O. Box 1508 Maumee, OH 43537-8508			Assignee or other notification for: Mercy Hospital Hamilton/Fairfield				
Account No. NCO Financial Systems Inc. P.O. Box 41457 Philadelphia, PA 49204-3500			Assignee or other notification for: Mercy Hospital Hamilton/Fairfield				
Account No. 3192013 Michael P. Margelesky LLC 709 Madison Ave., Suite 302 Toledo, OH 43624-1624		H	Collection Account		X		78.20

Sheet 8 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page)

3,021.10

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. NCO Financial Systems Inc. P.O. Box 3500 Jackson, MI 49204-3500		H	Collection Accounts		X		647.51
Account No. NCO Financial Systems Inc. P.O. Box 3500 Jackson, MI 49204-3500		W	Collection Account		X		102.85
Account No. Nedphrdogy Assox. Of SW Ohio Inc. Location 0871 Cincinnati, OH 45264		H	Medical Bill		X		215.00
Account No. Neuro Diagnostic Center Inc. 759 Wessell Dr., Suite 1 Fairfield, OH 45014		H	Medical Bill		X		31.00
Account No. New Century Physicians Inc. P.O. Box 631900 Cincinnati, OH 45263-1900		H	Medical Bill		X		475.50
Account No. New Century Physicians Inc. P.O. Box 631900 Cincinnati, OH 45263-1900		H	Medical Bill		X		131.20
Account No. Northeast Radiology P.O. Box 42468 Cincinnati, OH 45242		W	Medical Bill		X		66.00

Sheet 9 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page) **1,669.06**

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154			Assignee or other notification for: Northeast Radiology				
Account No. Northland Group Inc P.O. Box 390857 Edina, MN 55439		H	Collection Account		X		853.21
Account No. Nuray Radiologists Inc. P.O. Box 42417 Cincinnati, OH 45242		W	Medical Bill		X		43.65
Account No. Nuray Radiologists Inc. P.O. Box 42417 Cincinnati, OH 45242		H	Medical Bill		X		97.80
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154			Assignee or other notification for: Nuray Radiologists Inc.				
Account No. Orthopaedic Diagnostic & Treatment P.O. Box 771471 Chicago, IL 60677-1004		H	Medical Bill		X		150.31
Account No. Pathologists Inc. P.O. Box 42262 Cincinnati, OH 45242		H	Medical Bill		X		60.90

Sheet 10 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page) **1,205.87**

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

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IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154			Assignee or other notification for: Pathologists Inc.				
Account No. Periperative Medical Consultant, Inc P.O. Box 632335 Cincinnati, OH 45263-2335		H	Medical Bill		X		241.50
Account No. Providian P.O. Box 9539 Manchester, NH 03108		H	Credit Card		X		600.00
Account No. Ptime Med Physicians Depot. 1044, Box 63144 Cincinnati, OH 45263-1044		H	Medical Bill		X		80.00
Account No. Riverside Medical Center BV Ghassan Haj-Hamed 200 Fairfield Avenue Bellevue, KY 41073-1041		H	Medical Bill		X		1,268.45
Account No. Rumpke Consolidated Companies P.O. Box 538701 Cincinnati, OH 45253		H	Utility Bill		X		54.00
Account No. S. Nemat Moussavian, MD 9200 Montgomery Rd, Bldg. #18-A Cincinnati, OH 45242		H	Medical Bill		X		105.30

Sheet 11 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page) 2,349.25

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

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IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Premier Recovery Inc. P.O. Box 2658 Covington, KY 41012-2658			Assignee or other notification for: S. Nemat Moussavian, MD				
Account No. Sears Premier Card P.O. Box 182149 Columbus, OH 43218-2149		W	Credit Card		X		1,400.00
Account No. Silkies Pantyhose P.O. Box 7857 Philadelphia, PA 19188-0001		W	Panty hose		X		16.56
Account No. Southern Ohio Pathology Cons. P.O. Box 98 Batavia, OH 45103-0098		W	Medicla Bill		X		530.00
Account No. MQC Collection P.O. Box 14474 Toledo, OH 43614			Assignee or other notification for: Southern Ohio Pathology Cons.				
Account No. State Farm Insurance Co %Unlinger & Keis, Attorneys 75 Public Square, Suite 300 Cleveland, Ohio 44113		W	Auto Accident 2000		X		1,000.00
Account No. Thomas & Thomas LLC 2323 Park Avenue Cincinnati, OH 45206-2711		H	Collection Account		X		28.75
Subtotal (Total of this page)							2,975.31

Sheet 12 of 13 Continuation Sheets attached to Schedule F

(Complete only on last sheet of Schedule F) TOTAL

(Report total also on Summary of Schedules)

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IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 1 Time Warner Cable 11252 Cornell Park Cincinnati, OH 45242		H	Cable TV		X		213.94
Account No. United Collection Bureau Inc. 2912 Springboro West Suite 202 Dayton, OH 45439		H	Collection Accounts		X		173.00
Account No. United Collection Bureau Inc. 2912 Springboro West Suite 202 Dayton, OH 45439		W	Collection Account		X		390.00
Account No. Waller & Waller Family Practice 1253 Kemper Meadows Cincinnati, OH 45240		W	Medical Bill		X		13.00
Account No.							
Account No.							
Account No.							
Account No.							

Sheet 13 of 13 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page) **789.94**

(Complete only on last sheet of Schedule F) **TOTAL 30,893.76**

(Report total also on Summary of Schedules)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status Married	DEPENDENTS OF DEBTOR AND SPOUSE		
	NAMES	AGE	RELATIONSHIP
EMPLOYMENT: DEBTOR		SPOUSE	
Occupation Name of Employer How long employed Address of Employer	Retired N/A	Telemarketing RDI Marketing 3 Years, 8 Months 9920 Carver Road Cincinnati, Ohio 45242	

Income: (Estimate of average monthly income)

Current Monthly gross wages, salary, and commissions (pro rata if not paid monthly)

Estimated monthly overtime

SUBTOTAL**LESS PAYROLL DEDUCTIONS**

a. Payroll taxes and Social Security

b. Insurance

c. Union dues

d. Other (specify) 401K Plan**SUBTOTAL OF PAYROLL DEDUCTIONS****TOTAL NET MONTHLY TAKE HOME PAY**

Regular income from operation of business or profession or farm (attach detailed statement)

Income from real property

Interest and dividends

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

Social Security or other government assistance

(Specify) _____

Pension or retirement income

Other monthly income

(Specify) _____

TOTAL MONTHLY INCOME**TOTAL COMBINED MONTHLY INCOME \$ 1,903.21 (Report also on Summary of Schedules)**

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

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IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No.

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	995.00
Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Utilities: Electricity and heating fuel	\$	200.00
Water and sewer	\$	40.00
Telephone	\$	68.00
Other Trash Collection	\$	20.00
<hr/>		
Home maintenance (repairs and upkeep)	\$	35.00
Food	\$	258.00
Clothing	\$	100.00
Laundry and dry cleaning	\$	90.00
Medical and dental expenses	\$	
Transportation (not including car payments)	\$	128.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	69.33
Charitable contributions	\$	
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$	
Life	\$	
Health	\$	
Auto	\$	99.00
Other	\$	
<hr/>		
Taxes (not deducted from wages or included in home mortgage payments)	\$	
(Specify)	\$	
<hr/>		
Installment payments (in chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto	\$	
Other	\$	
<hr/>		
Alimony, maintenance, and support paid to others	\$	
Payments for support of additional dependents not living at your home	\$	
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
Other Bank Charges	\$	10.00
Haircare And Grooming	\$	44.00
<hr/>		
<hr/>		
<hr/>		

TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)

\$ 2,156.33

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income	\$	
B. Total projected monthly expenses	\$	
C. Excess income (A minus B)	\$	
D. Total amount to be paid into plan each	\$	

(interval)

IN RE HARRIS, Frederick & HARRIS, Mary L.

Case No. _____

Debtor(s)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(Total shown on summary page plus 1)

Date: January 9, 2003

Signature: Frederick Harris

Frederick HARRIS

Debtor

Date: January 9, 2003

Signature: Mary L. Harris

Mary L. HARRIS

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed or Typed Name of Bankruptcy Petition Preparer

Social Security No.

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document.

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

Signature of Bankruptcy Petition Preparer

Date

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedures may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(Total shown on summary page plus 1)

Date: _____

Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Southern District of Ohio**

IN RE:

Case No. _____

HARRIS, Frederick & HARRIS, Mary L.

Chapter 7

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

☐ None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE (if more than one)

23,010.00 RDI Marketing-2002

20,802.00 RDI Marketing -2001

2. Income other than from employment or operation of business

☐ None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

13,788.00 Government Pension-2002

13,788.00 Government Pension

3. Payments to creditors

☒ None a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ None b. List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

- None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**CAPTION OF SUIT
AND CASE NUMBER**

Cincinnati Gas & Electric vs.
Frederick Harris
02CV30227/0032201

NATURE OF PROCEEDING

Civil/Small Claims

**COURT OR AGENCY
AND LOCATION**

Hamilton County Court
Cincinnati, Ohio

**STATUS OR
DISPOSITION**

Judgment Plaintiff

Wells Fargo Bank Minnesota NA Foreclosure
vs. Frederick Harris et al
A0101857

Common Pleas Court
Hamilton, Ohio

Judgment for Plaintiff

- None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

- None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

- None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

- None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

- None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

James C. Smith
Attorney At Law
4000 Roosevelt Blvd.
Middletown, OH 45044

DATE OF PAYMENT, NAME OF
PAYOR IF OTHER THAN DEBTOR
January 6, 2003

AMOUNT OF MONEY OR DESCRIPTION
AND VALUE OF PROPERTY
500.00

10. Other transfers

- None ☒ List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, association, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

Note ☒ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six** years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six** years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six** years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six** years immediately preceding the commencement of this case.

Note ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: January 9, 2003

Signature
of Debtor

Frederick Harris

Frederick HARRIS

Date: January 9, 2003

Signature
of Joint Debtor
(if any)

Mary L. Harris

Mary L. HARRIS

0 continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

32

FILED
MB

IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF OHIO
CINCINNATI, OHIO

2003 FEB 10 PM 3:23

MICHAEL D. WEBB, CLERK
U.S. BANKRUPTCY COURT
SOUTHERN DISTRICT OF OHIO

IN RE:

FREDERICK HARRIS
MARY L. HARRIS

Debtors

CASE NO.: 03-10171

Chapter 7

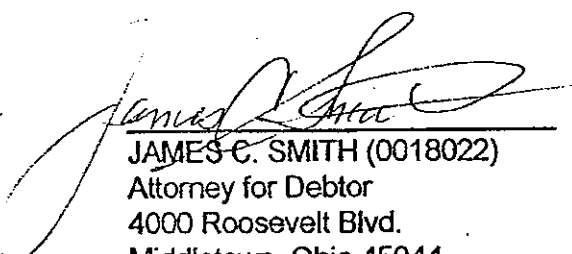
Judge: J. Vincent Aug Jr.

AMENDMENT TO
SCHEDULE F

Debtor herein amends schedule F to include as follows:

Fifth Third Bank	Unliquidated	NSF Checks
38 Fountain Square Plaza	Husband	
Cincinnati, Ohio 45263-0785	\$1,192.00	

Also notify: Fifth Third Bank
1212 West Kemper Road
Forest Park, Ohio 45240


JAMES C. SMITH (0018022)
Attorney for Debtor
4000 Roosevelt Blvd.
Middletown, Ohio 45044
Phone: (513) 424-2600

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing Notice of Continuance was forwarded to U. S. Trustee, 36 East Seventh Street, Suite 2050, Cincinnati, Ohio 45202, Richard D. Nelson, Trustee, 250 E. Fifth Street, Suite 1200, Cincinnati, Ohio 45202-4139 and to attached list of creditors by regular United States mail, postage paid, this 6th day of February, 2003.


JAMES C. SMITH (0018022)
Attorney for Debtors

110

United States Bankruptcy Court
Southern District of Ohio

IN RE:

Case No. 03-10171HARRIS, Frederick & HARRIS, Mary L.Chapter 7

Debtor(s)

AMENDED VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: February 12, 2003Signature: Frederick Harris

Frederick HARRIS

Debtor

Date: February 12, 2003Signature: Mary L. Harris

Mary L. HARRIS

Joint Debtor, if any

2003 FEB 14 PM 1:37
MICHAEL D. WEBB, CLERK
U.S. BANKRUPTCY COURT
SOUTHERN DISTRICT OF OHIO

FILED

Ace Check Cash
342 Northland Blvd
Cincinnati, OH 45240

Ace Check Cash
7331 Montgomery Road
Silverton, OH 45240

Alliance Lab Services
P.O. Box 695007
Cincinnati, OH 45269-5007

American Recovery Systems, Inc.
1699 Wall Street, Suite 300
Mt. Prospect, IL 60056-5788

Anesthesia Group Practice Inc.
P.O. Box 691429
Cincinnati, OH 45269-1429

AT&T Consumer Lease Services
P.O. Box 2130
Bedford Park, IL 60499-2130

Beacon Orthopedic Physicians
P.O. Box 641196
Cincinnati, OH 45264

Bhupendra Mahida MD
Location 0871
Cincinnati, OH 45264

Capital One
P.O. Box 85147
Richmond, VA 23285

CBT Receivables Management
P.O. Box 1508
Toledo, OH 43603

CBT Receivables Management
P.O. Box 1508
Maumee, OH 43537-8508

Check'N Go Of Ohio Inc.
1184 W. Kemper Rd
Cincinnati, OH 45240

Cincinnati Bell
Department 1811
Cincinnati, OH 45274-1811

Cincinnati Bell Wireless
P.O. Box 741832
Cincinnati, OH 45274-1832

Cinergy Corp
P.O. Box 740124
Cincinnati, OH 45274

City Of Forest Park Income Tax
1201 W. Kemper Road
Cincinnati, OH 45240

City Of Forest Park Utility
Stormwater Managment
1201 W. Kemper Road
Forest Park, OH 45240-1697

Controlled Credit Corp.
P.O. Box 5154
Cincinnati, OH 45205-0154

Crescent Womens Medical Group
P.O. Box 710820
Cincinnati, OH 45271

Deaconess Hospital
311 Straight Street
Cincinnati, OH 45219

Deborah A. Fritz MD
10550 Montgomery Rd. #23
Cincinnati, OH 45242

Diversified Adjustment Service Inc.
P.O. Box 32145
Fridley, MN 55432-0145

Faculty Plan Of Good Samaritan
P.O. Box 631395
Cincinnati, OH 45263

FAL Riverside Medical Fairfield
200 Fairfield Ave
Bellevue, KY 41073

Fifth Third Bank
Card Center
P.O. Box 740789
Cincinnati, OH 45274-0789

Fifth Third Bank
1212 West Kemper Road
Forest Park, OH 45240

Fifth Third Bank
38 Fountain Square Plaza
Cincinnati, OH 45263

Amended Creditor

Amended Creditor

First Consumers National Bank
P.O. Box 3567
Portland, OR 97208-3567

First Credit International Corp
P.O. Box 13283
Akron, OH 44334-8683

G C Services
Collection Agency Division
P.O. Box 2774
Houston, TX 77252

Good Samaritan Hospital
P.O. Box 20010
Cincinnati, OH 45220-0010

Good Samaritan Hospital
P.O. Box 69098
Cincinnati, OH 45269-0998

Greater Cincinnati Cardiovascular
Dept. 1462
Cincinnati, OH 45263-1462

Greater Cincinnati Waterworks
Dept. 1845
Cincinnati, OH 45274-1845

Hamilton Municipal Court
Small Claims Complaint
100 Main Street
Cincinnati, OH 45202

Hauw T. Han, MD
7593 Tylers Place Blvd.#104
West Chester, OH 45069-0000

Heartland Home Health Care & Hospice
Dept. L-1801
Columbus, OH 43260

Hehman & Bramlage, Md's Inc.
2943 Eastern Avenue
Cincinnati, OH 45226-1066

Household Finance Corp
1091 Smiley Avenue
Cincinnati, OH 45240

I.D.CC
872 Ohio Pike
Cincinnati, OH 45245

Internal Revenue Service
Cincinnati, OH 45999

J.C. Pennys
P.O. Box 530945
Atlanta, GA 30353-0945

Lab Corp. Of America
P.O. Box 2240
Burlington, NC 27216-2240

Medical Recovery Systems
P.O. Box 20010
Cincinnati, OH 45220-0010

Medical X-Ray Inc.
P.O. Box 42456
Cincinnati, OH 45242

Medical X-Ray Inc.
P.O. Box 960483
Cincinnati, OH 45296-0483

Mega City Collection
Midcity Station
P.O. Box 308
Dayton, OH 45402

Mercy Hospital Hamilton/Fairfield
P.O. Box 640855
Cincinnati, OH 45264-0855

Michael P. Margelefsky LLC
709 Madison Ave., Suite 302
Toledo, OH 43624-1624

MQC Collection
P.O. Box 14474
Toledo, OH 43614

NCO Financial Systems Inc.
P.O. Box 41457
Philadelphia, PA 49204-3500

NCO Financial Systems Inc.
P.O. Box 3500
Jackson, MI 49204-3500

Nephrology Assoc. of SW Ohio Inc.
Location 0871
Cincinnati, OH 45264

Neuro Diagnostic Center Inc.
759 Wessell Dr., Suite 1
Fairfield, OH 45014

New Century Physicians Inc.
P.O. Box 631900
Cincinnati, OH 45263-1900

Northeast Radiology
P.O. Box 42468
Cincinnati, OH 45242

Northland Group Inc
P.O. Box 390857
Edina, MN 55439

Nuray Radiologists Inc.
P.O. Box 42417
Cincinnati, OH 45242

Ocwen Federal Bank
1675 Palm Beach Lakes Blvd
Palm Beach, FL 33401-2122

Ohio Dept. Of Taxation
P.O. Box 182402
Columbus, OH 43218-2402

Orthopaedic Diagnostic & Treatment
P.O. Box 771471
Chicago, IL 60677-1004

Pathologists Inc.
P.O. Box 42262
Cincinnati, OH 45242

Periperative Medical Consultant, Inc
P.O. Box 632335
Cincinnati, OH 45263-2335

Premier Recovery Inc.
P.O. Box 2658
Covington, KY 41012-2658

Providian
P.O. Box 9539
Manchester, NH 03108

Ptime Med Physicians
Depot. 1044, Box 63144
Cincinnati, OH 45263-1044

Riverside Medical Center BV
Ghassan Haj-Hamed
200 Fairfield Avenue
Bellevue, KY 41073-1041

Rumpke Consolidated Companies
P.O. Box 538701
Cincinnati, OH 45253

S. Nemat Moussavian, MD
9200 Montgomery Rd, Bldg. #18-A
Cincinnati, OH 45242

Sears Premier Card
P.O. Box 182149
Columbus, OH 43218-2149

Silkies Pantyhose
P.O. Box 7857
Philadelphia, PA 19188-0001

Southern Ohio Pathology Cons.
P.O. Box 98
Batavia, OH 45103-0098

Surpas Resource Corp
Suite 150
10,000 Richmond
Houston, TX 77042-4200

The Huntington
P.O. Box 2059
Columbus, OH 43216

Thomas & Thomas LLC
2323 Park Avenue
Cincinnati, OH 45206-2711

Time Warner Cable
11252 Cornell Park
Cincinnati, OH 45242

United Collection Bureau Inc.
2912 Springboro West Suite 202
Dayton, OH 45439

Waller & Waller Family Practice
1253 Kemper Meadows
Cincinnati, OH 45240

43

United States Bankruptcy Court
Southern District of Ohio

03-10171

IN RE:

Case No. _____

HARRIS, Frederick & HARRIS, Mary L.

Chapter 7

Debtor(s)

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

1. I have filed a schedule of assets and liabilities which includes consumer debts secured by property of the estate.
2. I intend to do the following with respect to the property of the estate which secures those consumer debts:

a. Property to be Surrendered

DESCRIPTION OF PROPERTY

CREDITOR'S NAME

11716 Elkwood Drive

Ocwen Federal Bank

A

b. Property to be Retained [Check any applicable statement.]

DESCRIPTION OF PROPERTY

CREDITOR'S NAME

1998 Ford Windstar Van

The Huntington

PROPERTY
IS CLAIMED
AS EXEMPTPROPERTY
WILL BE
REDEEMED
PURSUANT
TO 11 U.S.C.
§ 722DEBT WILL
BE RE-
AFFIRMED
PURSUANT
TO 11 U.S.C.
§ 524(C)

FILED

MB

2003 JAN 10 AM 11:10

U.S. BANKRUPTCY COURT
SOUTHERN DISTRICT OF OHIO

01/09/2003

Date

Frederick HARRIS

Debtor

Mary L. HARRIS

Joint Debtor (if applicable)

CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed or Typed Name of Bankruptcy Petition Preparer

Social Security No.

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document.

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

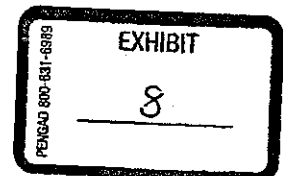
Signature of Bankruptcy Petition Preparer

Date

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedures may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

4



FORM B18 Continued (9/97)

Case: 1:03-bk-10171

**EXPLANATION OF BANKRUPTCY DISCHARGE
IN A CHAPTER 7 CASE**

This court order grants a discharge to the person named as the debtor. It is not a dismissal of the case and it does not determine how much money, if any, the trustee will pay to creditors.

Collection of Discharged Debts Prohibited

The discharge prohibits any attempt to collect from the debtor a debt that has been discharged. For example, a creditor is not permitted to contact a discharged debtor by mail, phone, or otherwise, to file or continue a lawsuit, to attach wages or other property, or to take any other action to collect a discharged debt from the debtor. *[In a case involving community property:]* A creditor who violates this order can be required to pay damages and attorney's fees to the debtor.

However, a creditor may have the right to enforce a valid lien, such as a mortgage or security interest, against the discharged debtor's property after the bankruptcy, if that lien was not avoided or eliminated in the bankruptcy case. Also, a debtor may voluntarily pay any debt that has been discharged.

Debts That are Discharged

The chapter 7 discharge order eliminates a debtor's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different chapter of the Bankruptcy Code and converted to chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a chapter 7 bankruptcy case are:

- a. Debts for most taxes;
- b. Debts that are in the nature of alimony, maintenance, or support;
- c. Debts for most student loans;
- d. Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e. Debts for personal injuries or death caused by the debtor's operation of a motor vehicle while intoxicated;
- f. Some debts which were not properly listed by the debtor;
- g. Debts that the bankruptcy court specifically has decided or will decide in this bankruptcy case are not discharged;
- h. Debts for which the debtor has given up the discharge protections by signing a reaffirmation agreement in compliance with the Bankruptcy Code requirements for reaffirmation of debts.

This information is only a general summary of the bankruptcy discharge. There are exceptions to these general rules. Because the law is complicated, you may want to consult an attorney to determine the exact effect of the discharge in this case.

BAE SYSTEMS

Enterprise Systems Incorporated
11487 Sunset Hills Road
Reston, Virginia 20190-5234

CERTIFICATE OF SERVICE

District/off: 0648-1
Case: 03-10171

User: admin
Form ID: b18

Page 1 of 3
Total Served: 92

Date Rcvd: May 14, 2003

The following entities were served by first class mail on May 16, 2003.

db Frederick Harris, 11716 Elkwood Drive, Cincinnati, OH 45240
db Mary L Harris, 11716 Elkwood Drive, Cincinnati, OH 45240
aty +James C Smith, 4000 Roosevelt Blvd, Middletown, OH 45044-3665
aty Jeffrey V Laurito, 35 Commercial Way, Springboro, OH 45066-3078
aty Karolina F Perr, 525 Vine Street, Suite 800, Cincinnati, OH 45202
ust Asst US Trustee, 36 East Seventh Street, Suite 2050, Cincinnati, OH 45202
3131546 +ACE CHECK CASH, 7331 MONTGOMERY ROAD, SILVERTON, OH 45236-4051
3131545 ACE CHECK CASH, 342 NORTHLAND BLVD, CINCINNATI, OH 45240
3131547 +ALLIANCE LAB SERVICES, P.O. BOX 695007, CINCINNATI, OH 45269-0001
3131548 AMERICAN RECOVERY SYSTEMS, INC., 1699 WALL STREET, SUITE 300, MT. PROSPECT, IL 60056-5788
3131549 +ANESTHESIA GROUP PRACTICE INC., P.O. BOX 691429, CINCINNATI, OH 45269-0001
3131550 AT&T CONSUMER LEASE SERVICES, P.O. BOX 2130, BEDFORD PARK, IL 60499-2130
3131551 BEACON ORTHOPEDIC PHYSICIANS, P.O. BOX 641196, CINCINNATI, OH 45264
3131552 BHUPENDRA MAHIDA MD, LOCATION 0871, CINCINNATI, OH 45264
3131553 CAPITAL ONE, P.O. BOX 85147, RICHMOND, VA 23285
3131555 CBT RECEIVABLES MANAGEMENT, P.O. BOX 1508, MAUMEE, OH 43537
3131554 CBT RECEIVABLES MANAGEMENT, P.O. BOX 1508, TOLEDO, OH 43603
3131556 CHECK 'N GO OF OHIO INC., 1184 W KEMPER RD, CINCINNATI, OH 45240
3131557 CINCINNATI BELL, DEPARTMENT 1811, CINCINNATI, OH 45274-1811
3131558 CINCINNATI BELL WIRELESS, P.O. BOX 741832, CINCINNATI, OH 45274-1832
3131559 CINERGY CORP., P.O. BOX 740124, CINCINNATI, OH 45274
3131560 CITY OF FOREST PARK INCOME TAX, 1201 W KEMPER ROAD, CINCINNATI, OH 45240
3131561 +CITY OF FOREST PARK UTILITY, STORMWATER MANAGMENT, 1201 W KEMPER ROAD, FOREST PARK, OH 45240-1617
3131562 CONTROLLED CREDIT CORP., P.O. BOX 5154, CINCINNATI, OH 45205-0154
3131563 CRESCENT WOMENS MEDICAL GROUP, P.O. BOX 710820, CINCINNATI, OH 45271
3131564 DEACONESS HOSPITAL, 311 STRAIGHT STREET, CINCINNATI, OH 45219
3131565 DEBORAH A. FRITZ MD, 10550 MONTGOMERY RD. #23, CINCINNATI, OH 45242
3131566 DIVERSIFIED ADJUSTMENT SERVICE INC., P.O. BOX 32145, FRIDLEY, MN 55432-0145
3131567 FACULTY PLAN OF GOOD SAMARITAN, P.O. BOX 631395, CINCINNATI, OH 45263
3131568 PAL RIVERSIDE MEDICAL FAIRFIELD, 200 FAIRFIELD AVE, BELLEVUE, KY 41073
3178813 FIFTH THIRD BANK, 1212 WEST KEMPER ROAD, FOREST PARK, OH 45240
3131569 FIFTH THIRD BANK, CARD CENTER, P.O. BOX 740789, CINCINNATI, OH 45274-0789
3172698 FIFTH THIRD BANK, 1212 W KEMPER ROAD, FOREST PARK OH 45240
3172697 +FIFTH THIRD BANK, 38 FOUNTAIN SQUARE PLAZA, CINCINNATI OH 45263-0001
3131570 FIRST CONSUMERS NATIONAL BANK, P.O. BOX 3567, PORTLAND, OR 97208-3567
3131571 FIRST CREDIT INTERNATIONAL CORP, P.O. BOX 13283, AKRON, OH 44334-8683
3131572 G C SERVICES, COLLECTION AGENCY DIVISION, P.O. BOX 2774, HOUSTON, TX 77252
3131573 GOOD SAMARITAN HOSPITAL, P.O. BOX 20010, CINCINNATI, OH 45220-0010
3131574 +GOOD SAMARITAN HOSPITAL, P.O. BOX 69098, CINCINNATI, OH 45269-0001
3131575 GREATER CINCINNATI CARDIOVASCULAR, DEPT. 1462, CINCINNATI, OH 45263-1462
3131576 GREATER CINCINNATI WATERWORKS, DEPT. 1845, CINCINNATI, OH 45274-1845
3131577 HAMILTON MUNICIPAL COURT, SMALL CLAIMS COMPLAINT, 100 MAIN STREET, CINCINNATI, OH 45202
3131578 +HAUW T. HAN, MD, 7593 TYLERS PLACE BLVD.#104, WEST CHESTER, OH 45069-6313
3178823 +HAUW T. HAN, MD, 7593 TYLERS PLACE BLVD.*104, WEST CHESTER, OH 45069-6312
3131579 HEARTLAND HOME HEALTH CARE & HOSPICE, DEPT. L-1801, COLUMBUS, OH 43260
3131580 +BEHMAN & BRAMLAGE, MD'S INC., 2943 EASTERN AVENUE, CINCINNATI, OH 45226-1099
3131581 HOUSEHOLD FINANCE CORP, 1091 SMILEY AVENUE, CINCINNATI, OH 45240
3131582 I. D. CC, 872 OHIO PIKE, CINCINNATI, OH 45245
3131583 INTERNAL REVUNE SERVICE, CINCINNATI, OH 45999
3131584 J.C. PENNEYS, P.O. BOX 530945, ATLANTA, GA 30353-0945
3178829 J.C. PENNYS, P.O. BOX 530945, ATLANTA, GA 30353-0945
3131585 LAB CORP OF AMERICA, P.O. BOX 2240, BURLINGTON, NC 27216-2240
3131586 MEDICAL RECOVERY SYSTEMS, P.O. BOX 20010, CINCINNATI, OH 45220-0010
3131587 MEDICAL X-RAY INC., P.O. BOX 42456, CINCINNATI, OH 45242
3131588 +MEDICAL X-RAY INC., P.O. BOX 960483, CINCINNATI, OH 45296-0001
3131589 MEGA CITY COLLECTION, MIDCITY STATION, P.O. BOX 308, DAYTON, OH 45402
3131590 MERCY HOSPITAL HAMILTON/FAIRFIELD, P.O. BOX 640855, CINCINNATI, OH 45264-0855
3131591 MICHAEL P. MARGELEFSKY LLC, 709 MADISON AVE., SUITE 302, TOLEDO, OH 43624-1624
3131592 MQC COLLECTION, P.O. BOX 14474, TOLEDO, OH 43614
3131594 NCO FINANCIAL SYSTEMS INC., P.O. BOX 3500, JACKSON, MI 49204-3500
3131593 +NCO FINANCIAL SYSTEMS INC., P.O. BOX 41457, PHILADELPHIA, PA 19101-1457
3131595 NEDPHRDGOGY ASSOC. OF SW OHIO INC., LOCATION 0871, CINCINNATI, OH 45264
3178840 NEDPHRDGOGY ASSOC. OF SW OHIO INC., LOCATION 0871, CINCINNATI, OH 45264
3131596 NEURO DIAGNOSTIC CENTER INC., 759 WESSELL DR., SUITE 1, FAIRFIELD, OH 45014
3178841 NEURO DIAGNOSTIC CENTER INC., 759 WESSELL DR., SUITE 1, FAIRFIELD, OH 45014
3131597 NEW CENTURY PHYSICIANS INC., P.O. BOX 631900, CINCINNATI, OH 45263-1900
3131598 NORTHEAST RADIOLOGY, P.O. BOX 42468, CINCINNATI, OH 45242
3131599 NORTHLAND GROUP INC, P.O. BOX 390857, EDINA, MN 55439
3131600 NURAY RADIOLOGISTS INC., P.O. BOX 42417, CINCINNATI, OH 45242
3178846 +OCWEN FEDERAL BANK, 1675 PALM BEACH LAKES BLVD, PALM BEACH, FL 33401-2199
3131601 +OCWEN FEDERAL BANK, 1675 PALM BEACH LAKES BLVD, PALM BEACH, FL 33401
3131602 OHIO DEPT. OF TAXATION, P.O. BOX 182402, COLUMBUS, OH 43218-2402
3131603 ORTHOPAEDIC DIAGNOSTIC & TREATMENT, P.O. BOX 771471, CHICAGO, IL 60677-1004
3131604 PATHOLOGISTS INC., P.O. BOX 42262, CINCINNATI, OH 45242
3131605 PERIPHERATIVE MEDICAL CONSULTANT, INC, P.O. BOX 632335, CINCINNATI, OH 45263-2335
3131606 +PREMIER RECOVERY INC., P.O. BOX 2658, COVINGTON, KY 41012
3131607 PROVIDIAN, P.O. BOX 9539, MANCHESTER, NH 03108
3131608 PTIME MED PHYSICIANS, DEPOT. 1044, BOX 63144, CINCINNATI, OH 45263-1044
3131609 RIVERSIDE MEDICAL CENTER BV, GHASSAN HAJ-HAMED, 200 FAIRFIELD AVENUE, BELLEVUE, KY 41073-1041
3131610 RUMPKE CONSOLIDATED COMPANIES, P.O. BOX 538701, CINCINNATI, OH 45253
3131611 S. NEMAT MOUSSAVIAN, MD, 9200 MONTGOMERY RD, BLDG. #18-A, CINCINNATI, OH 45242
3131612 SEARS PREMIER CARD, P.O. BOX 182149, COLUMBUS, OH 43218-2149

District/off: 0648-1
Case: 03-10171

User: admin
Form ID: b18

Page 2 of 3
Total Served: 92

Date Rcvd: May 14, 2003

3131613 SILKIES PANTYHOSE, P.O. BOX 7857, PHILADELPHIA, PA 19188-0001
3131614 SOUTHERN OHIO PATHOLOGY CONS., P.O. BOX 98, BATAVIA, OH 45103-0098
3178860 SURPAS RESOURCE CORP, SUITE 150, 10,000 RICHMOND, HOUSTON, TX 77042-4200
3131615 SURPAS RESOURCE CORP, SUITE 150, 10000 RICHMOND, HOUSTON, TX 77042-4200
3131616 THE HUNTINGTON, P.O. BOX 2059, COLUMBUS, OH 43216
3131617 +THOMAS & THOMAS LLC, 2323 PARK AVENUE, CINCINNATI, OH 45206-2788
3131618 TIME WARNER CABLE, 11252 CORNELL PARK, CINCINNATI, OH 45242
3131619 UNITED COLLECTION BUREAU INC., 2912 SPRINGBORO WEST SUITE 202, DAYTON, OH 45439
3131620 WALLER & WALLER FAMILY PRACTICE, 1253 KEMPER MEADOWS, CINCINNATI, OH 45240

The following entities were served by electronic transmission on May 14, 2003 and receipt of the transmission was confirmed on:

tr E-mail: rnelson@ctks.com May 14 2003 21:11:44 Richard D Nelson, 250 E Fifth St, Ste 1200, Cincinnati, OH 45202-4139
3131581 EDI: HFC.COM May 14 2003 18:12:00 HOUSEHOLD FINANCE CORP, 1091 SMILEY AVENUE, CINCINNATI, OH 45240

TOTAL: 2

***** BYPASSED RECIPIENTS (undeliverable, * duplicate) *****

cr Huntington National Bank
cr Wells Fargo Bank Minnesota NA
3178789* +ACE CHECK CASH, 7331 MONTGOMERY ROAD, SILVERTON, OH 45236-4051
3178788* ACE CHECK CASH, 342 NORTHLAND BLVD, CINCINNATI, OH 45240
3178790* +ALLIANCE LAB SERVICES, P.O. BOX 695007, CINCINNATI, OH 45269-0001
3178791* AMERICAN RECOVERY SYSTEMS, INC., 1699 WALL STREET, SUITE 300, MT. PROSPECT, IL 60056-5788
3178792* +ANESTHESIA GROUP PRACTICE INC., P.O. BOX 691429, CINCINNATI, OH 45269-0001
3178793* AT&T CONSUMER LEASE SERVICES, P.O. BOX 2130, BEDFORD PARK, IL 60499-2130
3178794* BEACON ORTHOPEDIC PHYSICIANS, P.O. BOX 641196, CINCINNATI, OH 45264
3178795* BHUPENDRA MAHIDA MD, LOCATION 0871, CINCINNATI, OH 45264
3178796* CAPITAL ONE, P.O. BOX 85147, RICHMOND, VA 23285
3178798* CBT RECEIVABLES MANAGEMENT, P.O. BOX 1508, MAUMEE, OH 43537-8508
3178797* CBT RECEIVABLES MANAGEMENT, P.O. BOX 1508, TOLEDO, OH 43603
3178799* CHECK'N GO OF OHIO INC., 1184 W. KEMPER RD, CINCINNATI, OH 45240
3178800* CINCINNATI BELL, DEPARTMENT 1811, CINCINNATI, OH 45274-1811
3178801* CINCINNATI BELL WIRELESS, P.O. BOX 741832, CINCINNATI, OH 45274-1832
3178802* CINERGY CORP, P.O. BOX 740124, CINCINNATI, OH 45274
3178803* CITY OF FOREST PARK INCOME TAX, 1201 W. KEMPER ROAD, CINCINNATI, OH 45240
3178804* +CITY OF FOREST PARK UTILITY, STORMWATER MANAGMENT, 1201 W. KEMPER ROAD, FOREST PARK, OH 45240-1617
3178805* CONTROLLED CREDIT CORP., P.O. BOX 5154, CINCINNATI, OH 45205-0154
3178806* CRESCENT WOMENS MEDICAL GROUP, P.O. BOX 710820, CINCINNATI, OH 45271
3178807* DEACONESS HOSPITAL, 311 STRAIGHT STREET, CINCINNATI, OH 45219
3178808* DEBORAH A. FRITZ MD, 10550 MONTGOMERY RD. #23, CINCINNATI, OH 45242
3178809* DIVERSIFIED ADJUSTMENT SERVICE INC., P.O. BOX 32145, FRIDLEY, MN 55432-0145
3178810* FACULTY PLAN OF GOOD SAMARITAN, P.O. BOX 631395, CINCINNATI, OH 45263
3178811* FAL RIVERSIDE MEDICAL FAIRFIELD, 200 FAIRFIELD AVE, BELLEVUE, KY 41073
3178812* FIFTH THIRD BANK, CARD CENTER, P.O. BOX 740789, CINCINNATI, OH 45274-0789
3178814* FIFTH THIRD BANK, 36 FOUNTAIN SQUARE PLAZA, CINCINNATI, OH 45263
3178815* FIRST CONSUMERS NATIONAL BANK, P.O. BOX 3567, PORTLAND, OR 97208-3567
3178816* FIRST CREDIT INTERNATIONAL CORP, P.O. BOX 13283, AKRON, OH 44334-8683
3178817* G C SERVICES, COLLECTION AGENCY DIVISION, P.O. BOX 2774, HOUSTON, TX 77252
3178818* GOOD SAMARITAN HOSPITAL, P.O. BOX 20010, CINCINNATI, OH 45220-0010
3178819* +GOOD SAMARITAN HOSPITAL, P.O. BOX 69098, CINCINNATI, OH 45269-0001
3178820* GREATER CINCINNATI CARDIOVASCULAR, DEPT. 1462, CINCINNATI, OH 45263-1462
3178821* GREATER CINCINNATI WATERWORKS, DEPT. 1845, CINCINNATI, OH 45274-1845
3178822* HAMILTON MUNICIPAL COURT, SMALL CLAIMS COMPLAINT, 100 MAIN STREET, CINCINNATI, OH 45202
3178824* HEARTLAND HOME HEALTH CARE & HOSPICE, DEPT. L-1801, COLUMBUS, OH 43260
3178825* +HEHMAN & BRAMLAGE, MD'S INC., 2943 EASTERN AVENUE, CINCINNATI, OH 45226-1099
3178826* HOUSEHOLD FINANCE CORP, 1091 SMILEY AVENUE, CINCINNATI, OH 45240
3178827* I.D.CC, 872 OHIO PIKE, CINCINNATI, OH 45245
3178828* INTERNAL REVUNE SERVICE, CINCINNATI, OH 45999
3178830* LAB CORP. OF AMERICA, P.O. BOX 2240, BURLINGTON, NC 27216-2240
3178831* MEDICAL RECOVERY SYSTEMS, P.O. BOX 20010, CINCINNATI, OH 45220-0010
3178832* MEDICAL X-RAY INC., P.O. BOX 42456, CINCINNATI, OH 45242
3178833* +MEDICAL X-RAY INC., P.O. BOX 960483, CINCINNATI, OH 45296-0001
3178834* MEGA CITY COLLECTION, MIDCITY STATION, P.O. BOX 308, DAYTON, OH 45402
3178835* MERCY HOSPITAL HAMILTON/FAIRFIELD, P.O. BOX 640855, CINCINNATI, OH 45264-0855
3178836* MICHAEL P. MARCELEFSKY LLC, 709 MADISON AVE., SUITE 302, TOLEDO, OH 43624-1624
3178837* MQC COLLECTION, P.O. BOX 14474, TOLEDO, OH 43614
3178839* NCO FINANCIAL SYSTEMS INC., P.O. BOX 3500, JACKSON, MI 49204-3500
3178838* +NCO FINANCIAL SYSTEMS INC., P.O. BOX 41457, PHILADELPHIA, PA 19101-1457
3178842* NEW CENTURY PHYSICIANS INC., P.O. BOX 631900, CINCINNATI, OH 45263-1900
3178843* NORTHEAST RADIOLOGY, P.O. BOX 42468, CINCINNATI, OH 45242
3178844* NORTHLAND GROUP INC, P.O. BOX 390857, EDINA, MN 55439
3178845* NURAY RADIOLOGISTS INC., P.O. BOX 42417, CINCINNATI, OH 45242
3178847* OHIO DEPT. OF TAXATION, P.O. BOX 182402, COLUMBUS, OH 43218-2402
3178848* ORTHOPAEDIC DIAGNOSTIC & TREATMENT, P.O. BOX 771471, CHICAGO, IL 60677-1004
3178849* PATHOLOGISTS INC., P.O. BOX 42262, CINCINNATI, OH 45242
3178850* PERIPHERATIVE MEDICAL CONSULTANT, INC, P.O. BOX 632335, CINCINNATI, OH 45263-2335
3178851* PREMIER RECOVERY INC., P.O. BOX 2658, COVINGTON, KY 41012
3178852* PROVIDIAN, P.O. BOX 9539, MANCHESTER, NH 03108
3178853* PTIME MED PHYSICIANS, DEPOT. 1044, BOX 63144, CINCINNATI, OH 45263-1044
3178854* RIVERSIDE MEDICAL CENTER BV, GHASSAN HAD-HAMED, 200 FAIRFIELD AVENUE, BELLEVUE, KY 41073-1041
3178855* RUMPKER CONSOLIDATED COMPANIES, P.O. BOX 538701, CINCINNATI, OH 45253

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3178857* SEARS PREMIER CARD, P.O. BOX 182149, COLUMBUS, OH 43218-2149
3178858* SILKIES PANTYHOSE, P.O. BOX 7857, PHILADELPHIA, PA 19188-0001
3178859* SOUTHERN OHIO PATHOLOGY CONS., P.O. BOX 98, BATAVIA, OH 45103-0098
3178861* THE HUNTINGTON, P.O. BOX 2059, COLUMBUS, OH 43216
3178862* +THOMAS & THOMAS LLC, 2323 PARK AVENUE, CINCINNATI, OH 45206-2788
3178863* TIME WARNER CABLE, 11252 CORNELL PARK, CINCINNATI, OH 45242
3178864* UNITED COLLECTION BUREAU INC., 2912 SPRINGBORO WEST SUITE 202, DAYTON, OH 45439
3178865* WALLER & WALLER FAMILY PRACTICE, 1253 KEMPER MEADOWS, CINCINNATI, OH 45240

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I, Joseph Speetjens, declare under the penalty of perjury that I have served the attached document on the above listed entities in the manner shown, and prepared the Certificate of Service and that it is true and correct to the best of my information and belief.

Date: May 16, 2003

Signature:

